| B1 (Official F | form 1)(4/ | (0) | | | | | | | | | | | |
|--|--|------------------------------|---|--|--|--|--|--|--|--|--|--------------------|----------|
| | | | United S Eas | | Bankr | | | | | | Volu | ıntary | Petition |
| Name of Del Davis, Je | | | er Last, First, | Middle): | | | Name | of Joint De | ebtor (Spouse | e) (Last, First | , Middle): | | |
| | All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | used by the maiden, and | | | years | | |
| | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EI (if more than one, state all) | | | EIN Last f | our digits o | f Soc. Sec. or | r Individual- | Гахрауег I.D | D. (ITIN) No | ./Complete EIN | | | |
| Street Addres 287 Belle Cobbs C | s Isle Lai | ne | Street, City, a | and State) | : | ZIP Cod | | Address of | Joint Debtor | r (No. and St | reet, City, an | d State): | ZIP Code |
| | | | | | T2 | 23035 | ie | | | | | | ZIP Code |
| County of Re Mathews | | of the Princ | cipal Place of | Business | | | Count | y of Reside | ence or of the | Principal Pl | ace of Busin | ess: | |
| Mailing Address of Debtor (if different from street address): | | | | | Mailii | ng Address | of Joint Debt | tor (if differe | nt from stree | et address): | | | |
| | | | | | _ | ZIP Cod | le | | | | | | ZIP Code |
| Location of P (if different fi | | | | | I | | I | | | | | | L |
| | Type of | Debtor | | | Nature o | f Busines | SS | | Chapter | r of Bankruj | tcv Code U | nder Whic | h |
| (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | | | (Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as det in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other ☐ Tax-Exempt Entity ☐ (Check box, if applicable) ☐ Debtor is a tax-exempt organiz under Title 26 of the United St | | | ty ble) ganization | defined | er 7 er 9 er 11 er 12 | of Consumer debts, \$ 101(8) as | hapter 15 Pe a Foreign M hapter 15 Pe a Foreign N e of Debts c one box) | tition for Re fain Proceed tition for Re fonmain Pro | ding ecognition | |
| | Fi | ing Fee (C | heck one box | | e (the Intern | | | a perso | onal, family, or | household pur | | | |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must chapter 5 installments. See Official Form 3B. | | | | Debtor is a si Debtor is not k if: Debtor's agg are less than k all applicabl A plan is bei Acceptances | a small businegate nonco \$2,343,300 (e boxes: ng filed with of the plan w | debtor as definess debtor as on the debtor as on the debtor as on the debtor as on the debtor as | defined in 11 U.S. defined in 11 | C. § 101(51D) J.S.C. § 101(5 cluding debts of on 4/01/13 and | (1D). Dowed to inside the every three thr | ers or affiliates) e years thereafter). ditors, | | | |
| Debtor es | timates that | t funds will t, after any | ation ** be available exempt propfor distributi | for distril erty is exc | bution to un cluded and a | secured c administra | | | | THIS | SPACE IS FO | OR COURT U | JSE ONLY |
| Estimated Nu 1- 49 | mber of C 50- 99 | reditors 100- 199 | 200- | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | |
| Estimated As \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,000 to \$100 million | 1 \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |
| Estimated Lia \$0 to \$50,000 | abilities \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,000 to \$100 million | 1 \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Davis, Jeffrey William (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Deanna H. Hathaway VSB February 24, 2011 Signature of Attorney for Debtor(s) (Date) Deanna H. Hathaway VSB 44150 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(4/10) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jeffrey William Davis

Signature of Debtor Jeffrey William Davis

 \mathbf{X} .

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 24, 2011

Date

Signature of Attorney*

X /s/ Deanna H. Hathaway VSB

Signature of Attorney for Debtor(s)

Deanna H. Hathaway VSB 44150

Printed Name of Attorney for Debtor(s)

Boleman Law Firm, P.C.

Firm Name

P.O. Box 11588 Richmond, VA 23230-1588

Address

Email: info@bolemanlaw.com

(804) 358-9900 Fax: (804) 358-8704

Telephone Number

February 24, 2011

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Davis, Jeffrey William

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

_

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | | | |
|-------|-----------------------|-----------|---------|----|
| | | Debtor(s) | Chapter | 13 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| 4 . | I am not require | ed to receive a credit | counseling briefing | because of: | [Check the | applicable |
|-------------|------------------|------------------------|---------------------|-------------|------------|------------|
| statement.] | [Must be accom | panied by a motion fo | or determination by | the court.] | | |

| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
|---|
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |

Signature of Debtor: /s/ Jeffrey William Davis

Jeffrey William Davis

Date: February 24, 2011

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | | Case No. | |
|-------|-----------------------|----------|----------|----|
| | | Debtor , | | |
| | | | Chapter | 13 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 3 | 17,375.43 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 10,308.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 4,577.50 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 8 | | 100,003.01 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 3,569.16 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,169.00 |
| Total Number of Sheets of ALL Schedu | ıles | 21 | | | |
| | To | otal Assets | 17,375.43 | | |
| | | | Total Liabilities | 114,888.51 | |

United States Bankruptcy Court Eastern District of Virginia

| Eastern District | of Virginia | | | |
|--|---|---------------------|------------------|---|
| Jeffrey William Davis | (| Case No. | | |
| 1 | Debtor (| Chapter | 13 | |
| STATISTICAL SUMMARY OF CERTAIN LL. If you are an individual debtor whose debts are primarily consumer dea case under chapter 7, 11 or 13, you must report all information requal. Check this box if you are an individual debtor whose debts are report any information here. This information is for statistical purposes only under 28 U.S.C. § Summarize the following types of liabilities, as reported in the Science. | ebts, as defined in § 101(8) dested below. NOT primarily consumer defined. | of the Bankruptcy C | dode (11 U.S.C.§ | _ |
| Type of Liability | Amount | | | |
| Domestic Support Obligations (from Schedule E) | 0.00 |] | | |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 4,577.50 | 1 | | |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 | 1 | | |
| Student Loan Obligations (from Schedule F) | 0.00 | | | |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 | | | |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 | | | |
| TOTAL | 4,577.50 | | | |
| State the following: | | _ | | |
| Average Income (from Schedule I, Line 16) | 3,569.16 | | | |
| Average Expenses (from Schedule J, Line 18) | 3,169.00 | | | |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 5,896.29 | | | |
| State the following: | | | | |
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | | 0.00 | |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 4,577.50 | | | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | | 0.00 | |
| 4. Total from Schedule F | | | 100,003.01 | |
| 5 Total of non-priority unsecured debt (sum of 1, 3, and 4) | | | 100 003 01 | |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| - | • | Dobton, | |
| | | Debtor | |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property Property Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, Wife, Joint, or Community

Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

| In re | Jeffrey William Davis | Case No |) |
|-------|-----------------------|--------------|---|
| | | , | |
| | | Debtor | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|--|---|---|
| 1. | Cash on hand | Cash on hand | - | 7.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Checking Account with BB&T | - | 140.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Security Deposit | - | 1,000.00 |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Household goods: kitchen utensils, decorative items, linens and small appliances, washer(s), dryer(s), computer(s), printer(s), microwave(s), television(s), VCR(s), DVD Player(s), lawnmower, sofa(s), loveseat(s), end table(s), armchair(s), lamps, dining table & chairs, bedroom set(s), chest(s), vacuum | - | 2,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | x | | |
| 6. | Wearing apparel. | Clothing | - | 250.00 |
| 7. | Furs and jewelry. | x | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | |
| 10. | Annuities. Itemize and name each issuer. | X | | |
| | | (Tot | Sub-Totatal of this page) | al > 3,897.00 |

2 continuation sheets attached to the Schedule of Personal Property

| In re | Jeffrey | William | Davis |
|-------|---------|---------|-------|
| | | | |

| Case No. | |
|----------|--|
| | |

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | (Continuation Sheet) | | |
|-----|---|------------------|---|---|---|
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | ERISA Approved 401(k) | - | Unknown |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | | Proceeds within six months of filing of bankruptcy petition from life insurance, property settlement, or any decedent's estate. | - | 1.00 |
| | | | | Sub-Tota | al > 1.00 |
| | | | (Tota | l of this page) | |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

| In re | Jeffrey | William | Davis |
|--------|----------|------------|-------|
| 111 10 | Jeille A | vviillaili | Davis |

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|---|------------------|---|---|--|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and | | 2007 Chevrolet Impala with 106,000 miles | - | 10,400.00 |
| | other vehicles and accessories. | | 1988 Chevrolet Suburban with 160,000 miles (value \$500) & 2003 Harley Davidson with 7,800 miles (value \$1200) | - | 1,700.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | | Garnished Wages | - | 1,377.43 |

| Sub-Total > 13,477.43 | | (Total of this page) | Total > 17,375.43 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

| • | |
|-----|----|
| ln. | ra |
| 111 | 10 |

Jeffrey William Davis

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled u (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) | \$146,450. (Amou | | emption that exceeds /13, and every three years thereaf or after the date of adjustment.) |
|--|---|----------------------------------|---|
| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
| Cash on Hand | | | |
| Cash on hand | Va. Code Ann. § 34-4 | 7.00 | 7.00 |
| Checking, Savings, or Other Financial Accounts, C | ertificates of Deposit | | |
| Checking Account with BB&T | Va. Code Ann. § 34-4 | 140.00 | 140.00 |
| Security Deposits with Utilities, Landlords, and Oth | ners | | |
| Security Deposit | Va. Code Ann. § 34-4 | 1,000.00 | 1,000.00 |
| Household Goods and Furnishings Household goods: kitchen utensils, decorative items, linens and small appliances, washer(s), dryer(s), computer(s), printer(s), microwave(s), television(s), VCR(s), DVD Player(s), lawnmower, sofa(s), loveseat(s), end table(s), armchair(s), lamps, dining table & chairs, bedroom set(s), chest(s), vacuum | Va. Code Ann. § 34-26(4a) | 2,500.00 | 2,500.00 |
| Wearing Apparel | | | |
| Clothing | Va. Code Ann. § 34-26(4) | 250.00 | 250.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension of ERISA Approved 401(k) | Profit Sharing Plans Patterson v. Shumate, 504 U.S. 753 (1991) Va. Code Ann. § 34-4 Va. Code Ann. § 34-34 | Unknown 1.00 Unknown | Unknown |
| Other Contingent and Unliquidated Claims of Every Proceeds within six months of filing of bankruptcy petition from life insurance, property settlement, or any decedent's estate. | <u>/ Nature</u> Va. Code Ann. § 34-4 | 1.00 | 1.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 2007 Chevrolet Impala with 106,000 miles | Va. Code Ann. § 34-26(8) Va. Code Ann. § 34-4 | 1,792.00 1.00 | 10,400.00 |
| 1988 Chevrolet Suburban with 160,000 miles (value \$500) & 2003 Harley Davidson with 7,800 miles (value \$1200) | Va. Code Ann. § 34-4 | 1.00 | 1,700.00 |
| Other Personal Property of Any Kind Not Already L Garnished Wages | <u>.isted</u> Va. Code Ann. § 34-4 | 1,377.43 | 1,377.43 |

| Total: | 7.070.43 | 17.375.43 |
|--------|----------|-----------|

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| | _ | | |

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | I N G E N | LIQUID | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|--------------|--|-----------------------|------------------|----------|--|---------------------------------|
| Account No. 02391225 | | | 04/08 | T | A T E D | | | |
| Ally Financial PO Box 380901 Minneapolis, MN 55438 | | - | PMSI 2007 Chevrolet Impala with 106,000 miles | | | | | |
| | | | Value \$ 10,400.00 | | | | 8,608.00 | 0.00 |
| Account No. Unknown | | | 2003 | | | | | |
| Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 | | - | Tax lien 1988 Chevrolet Suburban with 160,000 miles (value \$500) & 2003 Harley Davidson with 7,800 miles (value \$1200) | | | | | |
| | | | Value \$ 1,700.00 | | | | 1,700.00 | 0.00 |
| Account No. Internal Revenue Service 400 N. 8th St., Box 76 Stop Room 898 Richmond, VA 23219 | | | Representing: Internal Revenue Service | | | | Notice Only | |
| | | | Value \$ | 11 | | | | |
| Account No. Internal Revenue Service Proceedings & Insolvencies P.O. Box 21126 Philadelphia, PA 19114-0326 | | | Representing: Internal Revenue Service | | | | Notice Only | |
| | | | Value \$ | $\left\{ \ \right $ | | | | |
| continuation sheets attached | | | | L L Subto his p | | | 10,308.00 | 0.00 |
| | | | (Report on Summary of Sc | | otal iles | | 10,308.00 | 0.00 |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|-------------|--|
| - | - | , Debtor | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate and the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed the claim is disputed to the claim i "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

| Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to prioritisted on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|--|
| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report thi total also on the Statistical Summary of Certain Liabilities and Related Data. |
| ☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ■ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Jeffrey William Davis | Case No |
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| | | |

| Case No. | | |
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Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

| | | | | | | | TYPE OF PRIORITY | 7 |
|---|-----------------|-------------------|---|-------------|------------------|-------|--------------------|--|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | Hu H W J | | | UNLIQUIDA | SPUTE | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY |
| Account No. Unknown | | | 2008 & 2010 | Т | A T E D | | | |
| Internal Revenue Service 400 N. 8th St., Box 76 Stop Room 898 Richmond, VA 23219 | | - | Tax Balance Due | | | | 4,577.50 | 0.00 4,577.50 |
| Account No. | | | | | | | 4,577.50 | 4,517.50 |
| Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 | | | Representing: Internal Revenue Service | | | | Notice Only | |
| Account No. Internal Revenue Service Proceedings & Insolvencies P.O. Box 21126 Philadelphia, PA 19114-0326 | | | Representing: Internal Revenue Service | | | | Notice Only | |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| Sheet 1 of 1 continuation sheets at | | | | Sub | | | | 0.00 |
| Schedule of Creditors Holding Unsecured Pr | iorit | y Cl | aims (To | tal of this | pag Γota | | 4,577.50 | 4,577.50 0.00 |

(Report on Summary of Schedules)

4,577.50

4,577.50

| In re | Jeffrey William Davis | | Case No. | |
|-------|-----------------------|--------|----------|--|
| _ | | Debtor | , | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER | CODEBTO | J W H | | 11 | UZLLQU. | FUTE | 0 | AMOUNT OF CLAIM |
|---|---------|-------------|--|-------|-----------------------|------|---|-----------------|
| (See instructions above.) Account No. 514021800571 | O R | С | Opened 01/2007 | NGENT | I D A T E | | 5 | |
| Account No. 514021800571 | ┨ | | Credit Card Balance | ' | Ė | | | |
| Barclays Bank 125 S. West Street Wilmington, DE 19801 | | - | | | | | | 1,503.00 |
| Account No. 89349056-10 | t | | | 1 | | t | + | |
| Plaza Associates Re: Barclays Bank PO BOX 18008 Hauppauge, NY 11788-8808 | | | Representing: Barclays Bank | | | | | Notice Only |
| Account No. 418586179217, 447948060045 Chase Attn: Bankruptcy Dept 201 N. Walnut Street Wilmington, DE 19801 | | - | Opened 02/2008, 12/1997 Credit Card Balance | | | | | |
| g. , 2_ 10001 | | | | | | | | 2,983.00 |
| Account No. 404 Equable Ascent Financial Re: Chase 1120 W. Lake Cook Rd Ste A Buffalo Grove, IL 60089 | | | Representing: Chase | | | | | Notice Only |
| | | | (Total of | Subt | | | , | 4,486.00 |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| | | Debtor | |

| | | | | | | _ | _ | |
|--|----------|-------------|-------------------------------------|--------|-------------|----|-------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS | COD | | sband, Wife, Joint, or Community | CONT | N N | 1 | D I s | |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | | TINGEN | Q | | PUTED | AMOUNT OF CLAIM |
| Account No. 5424-1806-0887-3920 | | | Opened 11/2009 | ٦т | T E D | | | |
| Citibank Attn: Bankruptcy Dept Post Office Box 6062 Sioux Falls, SD 57117 | | _ | Credit Card Balance | | | , | | 728.00 |
| Account No. 542418060887 | | | | T | | 1 | | |
| Unifund CCR Corporation Re: Citibank 10625 Techwood Cir. Cincinnati, OH 45242-2846 | | | Representing: Citibank | | | | | Notice Only |
| Account No. Unknown | | | Unknown Medical Services | | | Ť | | |
| CJW Medical Center PO Box 13620 Richmond, VA 23225 | | _ | Medical Services | | | | | 628.00 |
| Account No. 35013333457 | | | | T | | 1 | | |
| Focused Recovery Solutions Re: CJW Medical Center 9701 Metropolitan Ct, Suite B Richmond, VA 23236-3662 | | | Representing: CJW Medical Center | | | | | Notice Only |
| Account No. 601138000624 | | | Opened 11/2006 | | | 1 | | |
| Direct Merchants Bank Attn: Bankruptcy Dept. 4848 S 129th East Ave Tulsa, OK 74134-7001 | | _ | Credit Card Balance | | | | | 6,091.00 |
| Sheet no1 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub | | | | 7,447.00 |
| Creations Holding Onsecuted Nonphority Claims | | | (10tal of | uns | μa | ge | ノ | |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| | | Debtor | |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGENT | UZLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|-----------------|------------------------|------------------------------------|------------|--------------|----------|-----------------|
| Account No. Unknown | | | Unknown |]⊤ | T E | | |
| DirecTV Attn: Bankruptcy Claims PO Box 6550 Englewood, CO 80155 | | - | Account Balance | | D | | 72.00 |
| Account No. 57784415 | | | | | | | |
| Allied Interstate Re: DirecTV PO Box 361774 Columbus, OH 43236 | | | Representing: DirecTV | | | | Notice Only |
| Account No. 426428299904 FIA Card Services P.O. Box 15026 Wilmington, DE 19850 | | - | Opened 06/2007 Judgment | | | | |
| Willington, BE 13030 | | | | | | | 4,852.00 |
| Account No. | t | | | \dagger | | | |
| Bank of America PO Box 17270 Wilmington, DE 19850-7270 | | | Representing: FIA Card Services | | | | Notice Only |
| Account No. 20503239 Glasser & Glasser Re: FIA Card Services, N.A. PO Box 3400 Norfolk, VA 23514 | - | | Representing: FIA Card Services | | | | Notice Only |
| Sheet no. 2 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub | | | 4,924.00 |
| Creditors Holding Unsecured Nondriority Claims | | | (10tal of | HIS | pas | (0) | I |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| _ | | Debtor | |

| | _ | _ | | _ | _ | _ | | |
|---|----------|-------------|---|-----------|------|----|-------------|-----------------|
| CREDITOR'S NAME, | C | Ηu | usband, Wife, Joint, or Community | Ϊč | U | | Ρĺ | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGEN | | | S P U T E D | AMOUNT OF CLAIM |
| Account No. 6044071004834731 | | | Opened 04/2006 | Т | ĮĘ | | Ī | |
| | | | Credit Card Balance | | Þ | | | |
| GEMB/Paypal PLCC PO Box 981064 El Paso, TX 79998 | | - | | | | | | 578.00 |
| Account No. 6044071004834731 | | | | T | T | Ť | ┪ | |
| Capital Management Services Re: GEMB/Paypal 726 Exchange Street St 700. Buffalo, NY 14210 | | | Representing: GEMB/Paypal PLCC | | | | | Notice Only |
| Account No. 604407100483 | | | | | | Ī | | |
| LVNVFUNDG Re: GEMB/Paypal PLCC PO Box 10584 Greenville, SC 29603 | | | Representing: GEMB/Paypal PLCC | | | | | Notice Only |
| Account No. 1X6GVO | | | | | | T | | |
| NCO Financial Re: GEMB/Paypal 507 Prudential Rd. Horsham, PA 19044-2308 | | | Representing: GEMB/Paypal PLCC | | | | | Notice Only |
| Account No. Multiple | | T | Opened 02/2003, 12/2001 | t | t | t | \dashv | |
| HSBC Bank PO Box 5253 Carol Stream, IL 60197 | | _ | Account Numbers: 5488-9750-2003-2465, 5489-5551-0276-5767 Credit Card Balance | | | | | 9,451.00 |
| Sheet no. 3 of 7 sheets attached to Schedule of | | | | Sub | tota | al | | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pa | ge | ;) | 10,029.00 |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| | | Debtor | |

| CREDITOR'S NAME, | С | Hu | sband, Wife, Joint, or Community | CO | U N | D | |
|--|----------|----------------------------|---|---------------|----------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTINGEN | LIQI | S P | AMOUNT OF CLAIM |
| Account No. YN1189 | | | | T | T E | | |
| CCB Credit Services, Inc. Re: HSBC Bank P.O. Box 272 Springfield, IL 62705 | | | Representing: HSBC Bank | | D | | Notice Only |
| Account No. 37930255 | | | | | | | |
| Enhanced Recovery Corporation Re: HSBC Bank 8014 Bayberry Rd Jacksonville, FL 32256 | | | Representing: HSBC Bank | | | | Notice Only |
| Account No. 2056551 | | | | | | | |
| Glasser & Glasser Re: Portfolio Recovery/HSBC PO Box 3400 Norfolk, VA 23514 | | Representing: HSBC Bank | | | | | Notice Only |
| Account No. 601138000624 | | \vdash | | ┢ | \vdash | | |
| Portfolio Recovery Re: HSBC Bank 120 Corporate Blvd, #100 Norfolk, VA 23502 | | | Representing: HSBC Bank | | | | Notice Only |
| Account No. Unknown | - | | 2001, 2003 | | \vdash | | |
| Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 | | _ | Non-priority Tax Balance Due | | | | 68,107.01 |
| | | | | Ļ | | L | 00,107.01 |
| Sheet no. <u>4</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | S (Total of th | Subt his j | | | 68,107.01 |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| - | - | | |

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | C | U | D | |
|---|----------|-------------|---|------------|--------------|-----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | Ī | AMOUNT OF CLAIM |
| Account No. | | | |]⊤ | T E | | |
| Internal Revenue Service 400 N. 8th St., Box 76 Stop Room 898 Richmond, VA 23219 | | | Representing: Internal Revenue Service | | D | | Notice Only |
| Account No. | | | | T | T | | |
| Internal Revenue Service Proceedings & Insolvencies P.O. Box 21126 Philadelphia, PA 19114-0326 | | | Representing: Internal Revenue Service | | | | Notice Only |
| Account No. 412061305905 | | | Opened 07/2005 | | | | |
| Merrick Bank PO Box 1500 Draper, UT 84020 | | - | Credit Card Balance | | | | 2,345.00 |
| Account No. 6035320220742702 | | | Opened 04/2007 | Т | Г | | |
| THD/CBSD CCS Gray Ops Center 541 Sid Martin Rd Gray, TN 37615 | | - | Credit Card Balance | | | | 1,185.00 |
| Account No. 6035320220742702 | | | | T | T | T | |
| CBE Group Re: THD/CBSD 131 Tower Park Dr., Ste 100 Waterloo, IA 50701-9374 | | | Representing: THD/CBSD | | | | Notice Only |
| Sheet no5 of _7 sheets attached to Schedule of | | | | Sub | | | 3,530.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | nis | pag | ge) | |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| _ | | Debtor | |

| | _ | _ | | _ | _ | _ | |
|--|-----------------|-------------|---------------------------------------|------------|--------------|----|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A H | CONSIDERATION FOR CLAIM. IF CLAIM | CONFINGENT | UNLIQUIDATED | ۱ų | AMOUNT OF CLAIM |
| Account No. SG4809 NCO Financial Re: THD/CBSD 507 Prudential Rd. Horsham, PA 19044-2308 | - | | Representing: THD/CBSD | | E D | | Notice Only |
| Account No. 5856374100918 Value City Furniture Re: Bankruptcy P.O Box 659704 San Antonio, TX 78265 | | - | Opened 09/2006 Account Balance | | | | 1,200.00 |
| Account No. 4064 Asset Acceptance Corp. Re: Value City Furniture PO Box 2036 Warren, MI 48090 | - | | Representing: Value City Furniture | | | | Notice Only |
| Account No. F52245178 Northland Group Inc. Re: Value City Furniture PO Box 390846 Minneapolis, MN 55439 | - | | Representing: Value City Furniture | | | | Notice Only |
| Account No. 9719004084090805 Verizon PO Box 3037 Bloomington, IL 61702 | | _ | Unknown Account Balance | | | | 280.00 |
| Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | Sub his | | | 1,480.00 |

| In re | Jeffrey William Davis | Case No. | |
|-------|-----------------------|----------|--|
| - | | Debtor | |

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | Ç | U | D | |
|--|----------------------------------|-------------|---|------------|---------------|----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | N L Q U L D A | DISPUTED | AMOUNT OF CLAIM |
| Account No. 030212699-01 | | | | 1 ï | T | | |
| AFNI Re: Verizon PO Box 3097 Bloomington, IL 61702 | | | Representing: Verizon | | D | | Notice Only |
| Account No. 16-9154284 | T | | | T | T | | |
| EOS CCA Re: Verizon Wireless 700 Longwater Drive Norwell, MA 02061 | | | Representing: Verizon | | | | Notice Only |
| Account No. | | | | T | T | | |
| | | | | | | | |
| Account No. | - | | | | | | |
| | | | | | | | |
| Account No. | | | | | | | |
| | | | | | | | |
| Sheet no7 of _7 sheets attached to Schedule of | - | | | Subt | tota | ıl | |
| Creditors Holding Unsecured Nonpriority Claims | Claims (Total of this page) 0.00 | | | | | 0.00 | |
| | | | (Report on Summary of So | | Γota dule | | 100,003.01 |

| In re | Jeffrey William Davis | Case No | |
|-------|-----------------------|---------|--|
| - | | , | |
| | | Debtor | |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. B6H (Official Form 6H) (12/07)

| In | leffrey William Davis | | Cosa Na | |
|-------|-----------------------|--------|----------|--|
| In re | Jeffrey William Davis | | Case No. | |
| _ | | Debtor | • | |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

| In re | Jeffrey William Davis | | Case No. | |
|-------|-----------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPENDENTS (| OF DEBTOR AND SI | POUSE | | |
|-------------------------------|---|------------------|----------|-------------|------------|
| Single | RELATIONSHIP(S): Son | AGE(S): | years | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | Store Manager | | | | |
| Name of Employer | Food Lion | | | | |
| How long employed | 9 years | | | | |
| Address of Employer | 2110 Executive Drive Salisbury, NC 28145 | | | | |
| INCOME: (Estimate of ave | rage or projected monthly income at time case filed) | • | DEBTOR | | SPOUSE |
| | ary, and commissions (Prorate if not paid monthly) | \$ | 5,304.35 | \$ | N/A |
| 2. Estimate monthly overtime | ne | \$ _ | 0.00 | \$ | N/A |
| 3. SUBTOTAL | | \$_ | 5,304.35 | \$ | N/A |
| 4. LESS PAYROLL DEDU | CTIONS | | | | |
| a. Payroll taxes and so | cial security | \$ | 1,142.57 | \$ | N/A |
| b. Insurance | | \$ | 419.29 | \$ | N/A |
| c. Union dues | | \$ | 0.00 | \$ | N/A |
| d. Other (Specify): | 401K LOAN (amortzied - 24 months remaining) | \$ | 117.00 | \$ | N/A |
| | 401K LOAN (amortized - 24 months remaining) | \$ | 56.33 | \$ | N/A |
| 5. SUBTOTAL OF PAYRO | LL DEDUCTIONS | \$_ | 1,735.19 | \$ | N/A |
| 6. TOTAL NET MONTHLY | Y TAKE HOME PAY | \$_ | 3,569.16 | \$ | N/A |
| 7. Regular income from ope | ration of business or profession or farm (Attach detailed state | ement) \$_ | 0.00 | \$ | N/A |
| 8. Income from real property | y | \$ _ | 0.00 | \$ | N/A |
| 9. Interest and dividends | | \$ _ | 0.00 | \$ | N/A |
| dependents listed above | | or that of \$ | 0.00 | \$ | N/A |
| 11. Social security or govern | nment assistance | | | _ | |
| (Specify): | | \$ | 0.00 | \$ <u> </u> | N/A |
| 10 P | | \$ | 0.00 | \$ | N/A |
| 12. Pension or retirement inc | come | \$_ | 0.00 | \$ | N/A |
| 13. Other monthly income | | ¢ | 0.00 | ď | NI/A |
| (Specify): | | —— | 0.00 | ф — | N/A N/A |
| | | | 0.00 | Φ | IN/A |
| 14. SUBTOTAL OF LINES | 7 THROUGH 13 | \$_ | 0.00 | \$ | N/A |
| 15. AVERAGE MONTHLY | Y INCOME (Add amounts shown on lines 6 and 14) | \$_ | 3,569.16 | \$ | N/A |
| 16. COMBINED AVERAG | E MONTHLY INCOME: (Combine column totals from line | 15) | \$ | 3,569.1 | 16 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

^{17.} Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor has been advised by employer that they will not be paying out any bonuses in 2011.

| In re | Jeffrey William Davis | | Case No. | |
|-------|-----------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| • | beled "Spouse." | | | | | |
|---------------------|--|-------------------------|-------------|----------------|------------|----------|
| | ne mortgage payment (include lot rente | | | | \$ | 1,000.00 |
| | tate taxes included? | Yes | No | | | |
| | insurance included? | Yes | No | X | | 4.5.00 |
| 2. Utilities: | a. Electricity and heating fuel | | | | \$ | 145.00 |
| | b. Water and sewer | | | | \$ | 0.00 |
| | c. Telephone | \ ((= = | | | \$ | 0.00 |
| 2.11 | d. Other See Detailed Expense A | Attacnment | | | | 561.00 |
| | tenance (repairs and upkeep) | | | | \$ | 0.00 |
| 4. Food | | | | | \$ | 400.00 |
| 5. Clothing | | | | | \$ | 25.00 |
| 6. Laundry and | | | | | \$ | 5.00 |
| | dental expenses | | | | \$ | 0.00 |
| | on (not including car payments) | | | | \$ | 300.00 |
| | clubs and entertainment, newspapers, | magazines, etc. | | | \$ | 102.00 |
| 10. Charitable | | • • | | | \$ | 0.00 |
| 11. Insurance (| not deducted from wages or included | in home mortgage pay | yments) | | Ф | 0.00 |
| | a. Homeowner's or renter's | | | | \$ | 0.00 |
| | b. Life | | | | \$ | 0.00 |
| | c. Health | | | | \$ | 0.00 |
| | d. Auto | | | | \$ | 156.00 |
| | e. Other | | | | \$ | 0.00 |
| 12. Taxes (not | deducted from wages or included in h | ome mortgage payme | nts) | | | == |
| | (Specify) Personal Property | | | | <u> </u> | 50.00 |
| | t payments: (In chapter 11, 12, and 13 | cases, do not list payr | nents to be | e included in | the | |
| plan) | | | | | | |
| | a. Auto | | | | \$ | 0.00 |
| | | | | | \$ | 0.00 |
| | c. Other | | | | | 0.00 |
| | naintenance, and support paid to other | | | | \$ | 400.00 |
| | for support of additional dependents no | | | | \$ | 0.00 |
| | penses from operation of business, pro | ofession, or farm (atta | ch detailed | l statement) | \$ | 0.00 |
| 17. Other Ha | aircuts and Personal Grooming | | | | \$ | 25.00 |
| Other | | | | | \$ | 0.00 |
| | E MONTHLY EXPENSES (Total line on the Statistical Summary of Certain I | | | of Schedule | es and, \$ | 3,169.00 |
| 19. Describe a | ny increase or decrease in expenditure iling of this document: | | | r within the y | year | |
| | ming of this document. | | | | | |
| | ENT OF MONTHLY NET INCOME | | | | * | |
| | nonthly income from Line 15 of Scheo | lule I | | | \$ | 3,569.16 |
| _ | nonthly expenses from Line 18 above | | | | \$ | 3,169.00 |
| c. Monthly n | et income (a. minus b.) | | | | \$ | 400.16 |

| B6J (Off | cial Form 6J) (12/07) | | |
|----------|-----------------------|----------|--|
| In re | Jeffrey William Davis | Case No. | |

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Utility Expenditures:

| Natural Gas | 325.00 |
|----------------------------------|--------------|
| Cable & Internet | \$ 69.00 |
| Cell Phone | \$ 167.00 |
| Total Other Utility Expenditures | \$ 561.00 |

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | | Case No. | | | | |
|---|---|-----------|--|---------|------|--|--|
| | | | Debtor(s) | Chapter | 13 | | |
| | | | | | | | |
| | DECLARATION CONCERNING DEBTOR'S SCHEDULES | | | | | | |
| DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR | | | | | BTOR | | |
| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. | | | | | | |
| Date | February 24, 2011 | Signature | /s/ Jeffrey William Davis Jeffrey William Davis Debtor | 5 | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | Case No. | Case No. | | |
|-------|-----------------------|-----------|----------|----|--|
| | | Debtor(s) | Chapter | 13 | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$7,344.48 2011 Employment Income \$63,000.00 2010 Employment Income \$70,080.00 2009 Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
FIA Cards vs. Jeffrey Davis

NATURE OF PROCEEDING **Garnishment**

COURT OR AGENCY
AND LOCATION
Chesterfield County GDC

STATUS OR DISPOSITION 06/23/11

Summons

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$200.00 - Legal Fees

Boleman Law Firm 2104 Laburnum Avenue Ste 201 Richmond, VA 23230-1588 NAME AND ADDRESS OF PAYEE

Boleman Law Firm 2104 Laburnum Avenue Ste 201 Richmond, VA 23230-1588 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$274.00 - Bankruptcy Filing

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 5220 Ronson Road Richmond, VA 23234 NAME USED Same

DATES OF OCCUPANCY

2009 - 5/10

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | February 24, 2011 | Signature | /s/ Jeffrey William Davis |
|------|-------------------|-----------|---------------------------|
| | | | Jeffrey William Davis |
| | | | Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court Eastern District of Virginia

| In | re _ Jeffrey William Davis | Case No | |
|----|---|---|--|
| | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMPENSATION OF ATTO | ORNEY FOR D | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I a compensation paid to me, for services rendered or to be rendered on behalf of the bankruptcy case is as follows: | | |
| | For legal services, I have agreed to accept | \$ <u></u> | 3,000.00 |
| | Prior to the filing of this statement I have received | | 200.00 |
| | Balance Due | \$ | 2,800.00 |
| 2. | \$ of the filing fee has been paid. | | |
| 3. | The source of the compensation paid to me was: | | |
| | ■ Debtor \square Other (specify) | | |
| 4. | The source of compensation to be paid to me is: | | |
| | ■ Debtor \square Other (specify) | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with any other person | on unless they are me | mbers and associates of my law firm |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in t | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all aspeta. Analysis of the debtor's financial situation, and rendering advice to the debtor in db. Preparation and filing of any petition, schedules, statement of affairs and plan white. Representation of the debtor at the meeting of creditors and confirmation hearing, db. Other provisions as needed: Subject to the terms of Paragraph 7, the Boleman Law Firm, P.C. agree bankruptcy case until entry of an order of withdrawal or substitution of | letermining whether to ch may be required; and any adjourned he es to represent De | o file a petition in bankruptcy; earings thereof; ebtor(s) throughout this |

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation may be provided by any or all attorneys of the Boleman Law Firm, P.C.

Representation of Debtor(s) in any adversary proceedings; avoidance of any undisclosed liens; obtaining remedies or enforcement of rights based upon non-bankruptcy law; or representation in any forum outside of the U.S. Bankruptcy Court are specifically excluded. The Fees and Costs Agreement between the Boleman Law Firm, P.C. and Debtor(s) is neither a "flat fee" agreement nor a "maximum fee" agreement. The Boleman Law Firm reserves the right to seek compensation in excess of the fee requested in Paragraph 1, where the fees for services provided to Debtor(s) exceed the above stated amount, based upon the hours of services provided multiplied by the hourly billing rate as set forth in the Fees and Costs Agreement between the Boleman Law Firm and Debtor(s) and such services are billable at either the contractual or current rates as provided by that Agreement. Costs advanced by the Boleman Law Firm are the liability of Debtor(s) and, upon order of the Court, shall be reimbursed to the firm.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 24, 2011

Date

/s/ Deanna H. Hathaway VSB

Deanna H. Hathaway VSB 44150

Signature of Attorney

Boleman Law Firm, P.C.

Name of Law Firm P.O. Box 11588 Richmond, VA 23230-1588 (804) 358-9900 Fax: (804) 358-8704

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$3,000 (For all Cases Filed on or after 10/17/2005)

NOTICE TO DEBTOR(S) AND STANDING TRUSTEE PURSUANT TO INTERIM PROCEDURE 2016-1(C)(7)

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C)(7)(a), you have ten (10) business days from the meeting of creditors in this case in which to file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 Trustee, and U. S. Trustee pursuant to Interim Procedure 2016-1(C)(7)(a) and Local Bankruptcy Rule 2002-1(D)(1)(f), by first-class mail or electronically.

February 24, 2011

Date

/s/ Deanna H. Hathaway VSB

Deanna H. Hathaway VSB 44150

Signature of Attorney

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | | Case No. | | | | | |
|-------------------------|---|-------------------------------|---------------------|-------------------------------|--|--|--|--|
| | | Debtor(s) | Chapter | 13 | | | | |
| | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE | | | | | | | |
| Certification of Debtor | | | | | | | | |
| Code | I (We), the debtor(s), affirm that I (we) have re | eceived and read the attached | notice, as required | by § 342(b) of the Bankruptcy | | | | |

 Jeffrey William Davis
 X
 /s/ Jeffrey William Davis
 February 24, 2011

 Printed Name(s) of Debtor(s)
 Signature of Debtor
 Date

 Case No. (if known)
 X
 Signature of Joint Debtor (if any)
 Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Eastern District of Virginia

| In re | Jeffrey William Davis | Case No. |
|-------|--|------------------------------------|
| | Debtor(s) | Chapter 13 |
| | COVER SHEET FOR LIST OF CREDIT | TORS |
| | I hereby certify under penalty of perjury that the master massubmitted either on computer diskette, by a typed hard copy in scan for Waiver attached, or uploaded by Electronic Case Filing is a true to the best of my knowledge. | nable format, with Request |
| | I further acknowledge that (1) the accuracy and completeness in pre the shared responsibility of the debtor and the debtor's attorney, (2) creditor listing for all mailings, and (3) that the various schedules ar Bankruptcy Rules are not used for mailing purposes. | the court will rely on the |
| | Master mailing list of creditors submitted via: | |
| | (a) computer diskette listing a total of creditors; of | r |
| | (b) scannable hard copy, with Request for Waiver attached a total of creditors; or | ched, consisting of pages, listing |
| | (c) X uploaded via Electronic Case Filing a total of 3 | creditors. |
| | | |
| | | |
| Date: | February 24, 2011 /s/ Jeffrey William Davis | |
| | Jeffrey William Davis | |

Signature of Debtor

[Check if applicable] ___ Creditor(s) with foreign addresses included on disk/hard copy.

[diskcs ver. R-05/23/00]

Office of the US Trustee 701 E. Broad Street Room 4304 Richmond, VA 23219

AFNI Re: Verizon PO Box 3097 Bloomington, IL 61702

Allied Interstate Re: DirecTV PO Box 361774 Columbus, OH 43236

Ally Financial PO Box 380901 Minneapolis, MN 55438

Asset Acceptance Corp. Re: Value City Furniture PO Box 2036 Warren, MI 48090

Bank of America PO Box 17270 Wilmington, DE 19850-7270

Barclays Bank 125 S. West Street Wilmington, DE 19801

Capital Management Services Re: GEMB/Paypal 726 Exchange Street St 700. Buffalo, NY 14210

CBE Group
Re: THD/CBSD
131 Tower Park Dr., Ste 100
Waterloo, IA 50701-9374

CCB Credit Services, Inc. Re: HSBC Bank P.O. Box 272 Springfield, IL 62705

Chase Attn: Bankruptcy Dept 201 N. Walnut Street

Wilmington, DE 19801

Citibank

Attn: Bankruptcy Dept Post Office Box 6062 Sioux Falls, SD 57117

CJW Medical Center PO Box 13620 Richmond, VA 23225

Direct Merchants Bank Attn: Bankruptcy Dept. 4848 S 129th East Ave Tulsa, OK 74134-7001

DirecTV Attn: Bankruptcy Claims PO Box 6550 Englewood, CO 80155

Enhanced Recovery Corporation Re: HSBC Bank 8014 Bayberry Rd Jacksonville, FL 32256

EOS CCA Re: Verizon Wireless 700 Longwater Drive Norwell, MA 02061

Equable Ascent Financial Re: Chase 1120 W. Lake Cook Rd Ste A Buffalo Grove, IL 60089

FIA Card Services P.O. Box 15026 Wilmington, DE 19850 Focused Recovery Solutions Re: CJW Medical Center 9701 Metropolitan Ct, Suite B Richmond, VA 23236-3662

GEMB/Paypal PLCC PO Box 981064 El Paso, TX 79998

Glasser & Glasser Re: FIA Card Services, N.A. PO Box 3400 Norfolk, VA 23514

Glasser & Glasser Re: Portfolio Recovery/HSBC PO Box 3400 Norfolk, VA 23514

HSBC Bank PO Box 5253 Carol Stream, IL 60197

Internal Revenue Service 400 N. 8th St., Box 76 Stop Room 898 Richmond, VA 23219

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Proceedings & Insolvencies P.O. Box 21126 Philadelphia, PA 19114-0326

LVNVFUNDG
Re: GEMB/Paypal PLCC
PO Box 10584
Greenville, SC 29603

Merrick Bank PO Box 1500 Draper, UT 84020 NCO Financial Re: GEMB/Paypal 507 Prudential Rd. Horsham, PA 19044-2308

NCO Financial Re: THD/CBSD 507 Prudential Rd. Horsham, PA 19044-2308

Northland Group Inc. Re: Value City Furniture PO Box 390846 Minneapolis, MN 55439

Plaza Associates Re: Barclays Bank PO BOX 18008 Hauppauge, NY 11788-8808

Portfolio Recovery Re: HSBC Bank 120 Corporate Blvd, #100 Norfolk, VA 23502

THD/CBSD CCS Gray Ops Center 541 Sid Martin Rd Gray, TN 37615

Unifund CCR Corporation Re: Citibank 10625 Techwood Cir. Cincinnati, OH 45242-2846

Value City Furniture Re: Bankruptcy P.O Box 659704 San Antonio, TX 78265

Verizon PO Box 3037 Bloomington, IL 61702 B22C (Official Form 22C) (Chapter 13) (12/10)

| In re | Jeffrey William Davis | According to the calculations required by this statement: |
|--------|-----------------------|---|
| | Debtor(s) | ☐ The applicable commitment period is 3 years. |
| Case N | Jumber: | ■ The applicable commitment period is 5 years. |
| | (If known) | ■ Disposable income is determined under § 1325(b)(3). |
| | | \square Disposable income is not determined under § 1325(b)(3). |
| | | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | Part I. REPORT OF INCOME | | | | | | | | |
|---|---|-----------------------|--------------------|--------------------|--|--|--|--|--|
| | Marital/filing status. Check the box that applies and complete the balance of this part of this state | emen | t as directed. | | | | | | |
| 1 | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. | | | | | | | | |
| | b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") | ome") for Lines 2-10. | | | | | | | |
| | All figures must reflect average monthly income received from all sources, derived during the six | Ī | Column A | Column B | | | | | |
| | calendar months prior to filing the bankruptcy case, ending on the last day of the month before | | | | | | | | |
| | the filing. If the amount of monthly income varied during the six months, you must divide the | | Debtor's Income | Spouse's Income | | | | | |
| | six-month total by six, and enter the result on the appropriate line. | | nicome | Income | | | | | |
| 2 | Gross wages, salary, tips, bonuses, overtime, commissions. | \$ | 5,896.29 | \$ | | | | | |
| | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do | | | | | | | | |
| 3 | not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. | | | | | | | | |
| 3 | Debtor Spouse | | | | | | | | |
| | a. Gross receipts \$ 0.00 \$ | | | | | | | | |
| | b. Ordinary and necessary business expenses \$ 0.00 \$ | | | | | | | | |
| | c. Business income Subtract Line b from Line a | \$ | 0.00 | \$ | | | | | |
| 4 | Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse | | | | | | | | |
| | a. Gross receipts \$ 0.00 \$ | | | | | | | | |
| | b. Ordinary and necessary operating expenses \$ 0.00 \$ | | | | | | | | |
| | c. Rent and other real property income Subtract Line b from Line a | \$ | 0.00 | \$ | | | | | |
| 5 | Interest, dividends, and royalties. | \$ | 0.00 | \$ | | | | | |
| 6 | Pension and retirement income. | \$ | 0.00 | \$ | | | | | |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. | \$ | 0.00 | \$ | | | | | |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | | | | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ | \$ | 0.00 | \$ | | | | | |

| 9 | international or domestic terrorism. | | | | | | |
|-----|--|--|--|---|-------|-----------|--|
| | a. \$ | Debtor | Spouse \$ | | | | |
| | b. \$ | | \$ | \$ 0.0 | \$ | | |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, and, if Co in Column B. Enter the total(s). | olumn B is complete | ted, add Lines 2 through 9 | \$ 5,896.2 | 29 \$ | | |
| 11 | Total. If Column B has been completed, add Line 10, the total. If Column B has not been completed, enter | | | \$ | | 5,896.29 | |
| | Part II. CALCULATION (| OF § 1325(b)(4 |) COMMITMENT 1 | PERIOD | | | |
| 12 | Enter the amount from Line 11 | | | | \$ | 5,896.29 | |
| 13 | Marital Adjustment. If you are married, but are not a calculation of the commitment period under § 1325(b) enter on Line 13 the amount of the income listed in Litthe household expenses of you or your dependents an income (such as payment of the spouse's tax liability debtor's dependents) and the amount of income devote on a separate page. If the conditions for entering this a. b. c. Total and enter on Line 13 | (4) does not require 10, Column B d specify, in the lip or the spouse's suped to each purpose | re inclusion of the income that was NOT paid on a re nes below, the basis for ex port of persons other than . If necessary, list additio | of your spouse, gular basis for cluding this the debtor or the | \$ | 0.00 | |
| 1.4 | | | | | | | |
| 14 | Subtract Line 13 from Line 12 and enter the result | | | | \$ | 5,896.29 | |
| 15 | Annualized current monthly income for § 1325(b)(enter the result. | 4). Multiply the a | mount from Line 14 by the | e number 12 and | \$ | 70,755.48 | |
| 16 | Applicable median family income. Enter the median (This information is available by family size at www.uww.uww.uww.uww.uww.uww.uww.uww.uww | | | | | | |
| | a. Enter debtor's state of residence: VA | b. Enter del | otor's household size: | 2 | \$ | 62,586.00 | |
| 17 | Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement. | | | | | | |
| | Part III. APPLICATION OF § 1325 | (b)(3) FOR DET | ERMINING DISPOSAB | LE INCOME | 1 | | |
| 18 | Enter the amount from Line 11. | | | | \$ | 5,896.29 | |
| 19 | Marital Adjustment. If you are married, but are not any income listed in Line 10, Column B that was NO debtor or the debtor's dependents. Specify in the lines payment of the spouse's tax liability or the spouse's su dependents) and the amount of income devoted to eac separate page. If the conditions for entering this adjust a. b. c. | Γ paid on a regular below the basis for apport of persons on the purpose. If necessity is a regular purpose. | basis for the household enter excluding the Column B ther than the debtor or the ssary, list additional adjust | xpenses of the income(such as debtor's | | | |
| | Total and enter on Line 19. | | | | \$ | 0.00 | |
| 20 | Current monthly income for § 1325(b)(3). Subtract | Line 19 from Line | e 18 and enter the result. | | \$ | 5,896.29 | |

| 21 | Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result. | | | | | | | \$ | 70,755.48 |
|---|--|---|---|----------------------|---|---|--|----------|-----------|
| 22 | Applic | cable median family incon | ne. Enter the amount fro | m Liı | ne 16. | | | \$ | 62,586.00 |
| | Applic | cation of § 1325(b)(3). Che | ck the applicable box a | nd pro | oceed as | directed. | | <u> </u> | -, |
| 23 | | e amount on Line 21 is mo 25(b)(3)" at the top of page | | | | | | nined | under § |
| ☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part VII of this statement. | | | | | | | | | |
| | | Part IV. CA | ALCULATION (| OF I | DEDU | CTIONS FR | OM INCOME | | |
| | | Subpart A: Do | eductions under Sta | ndar | ds of th | e Internal Revo | enue Service (IRS) | | |
| 24A | Enter is applica bankru | nal Standards: food, appar n Line 24A the "Total" amo able number of persons. (T ptcy court.) The applicable r federal income tax return. | ount from IRS National his information is availa number of persons is the | Standable at the nur | lards for t <u>www.u</u> nber tha | Allowable Living sdoj.gov/ust/ or free twould currently | Expenses for the com the clerk of the be allowed as exemptions | \$ | 985.00 |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. | | | | | | | | |
| | Perso | ns under 65 years of age | | Pers | sons 65 | years of age or ol | der | | |
| | a1. | Allowance per person | 60 | a2. | Allowa | ance per person | 144 | | |
| | b1. | Number of persons | 2 | b2. | Numbe | er of persons | 0 | | |
| | c1. | Subtotal | 120.00 | c2. | Subtot | al | 0.00 | \$ | 120.00 |
| 25A | Utilitie availab the nur | Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/onber that would currently build ditional dependents whom | expenses for the applic or from the clerk of the be allowed as exemption | able c oankrı | county a uptcy co | nd family size. (Turt). The applicab | This information is le family size consists of | \$ | 443.00 |
| 25B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any | | | | | | | | |
| | | IRS Housing and Utilities | | | | \$ | 823.00 | | |
| | | Average Monthly Payment home, if any, as stated in L | ine 47 | by you | uI | \$ | 0.00 | | |
| | | Net mortgage/rental expen | | | | Subtract Line b f | | \$ | 823.00 |
| 26 | 25B do Standa | Standards: housing and uppers not accurately computerds, enter any additional antion in the space below: | the allowance to which | you a | re entitl | ed under the IRS 1 | Housing and Utilities | | |
| | | al rent is \$1000 per mor | nth | | | | | \$ | 300.00 |

| Local Standards: transportation; vehicle operation/public transportation expense. You are enterpense allowance in this category regardless of whether you pay the expenses of operating a vehicle regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating included as a contribution to your household expenses in Line 7. 1 1 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards | | | | | |
|--|--|----|--------------------------|--|--|
| Check the number of vehicles for which you pay the operating expenses or for which the operating included as a contribution to your household expenses in Line 7. \square 0 \square 1 \square 2 or more. | cle and | | | | |
| included as a contribution to your household expenses in Line 7. \square 0 \square 1 \square 2 or more. | expenses are | | | | |
| If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards | | | | | |
| Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Stat Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankr | om IRS Local tistical Area or | \$ | 478.00 | | |
| for a vehicle and also use public transportation, and you contend that you are entitled to an addition your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | |
| Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of veh you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more the vehicles.) 1 | portation | | 0.00 | | |
| a. IRS Transportation Standards, Ownership Costs \$ | 496.00 | | | | |
| Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 | 159.50 | | | | |
| c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. | | \$ | 336.50 | | |
| the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transp (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total | | | | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. | | | | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$ | | | | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. | b from Line a | | | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle | 0.00 0.00 | \$ | 0.00 | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 \$ | 0.00 0.00 r for all federal, | \$ | 0.00 1,142.57 | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incurstate, and local taxes, other than real estate and sales taxes, such as income taxes, self employment | 0.00 0.00 r for all federal, taxes, social | • | | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incurstate, and local taxes, other than real estate and sales taxes, such as income taxes, self employment security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average medicular deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment, such as mandatory retirement contributions, union deductions that are required for your employment. | b from Line a 0.00 0.00 r for all federal, taxes, social onthly on dues, and | \$ | 1,142.57 | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. [a.] IRS Transportation Standards, Ownership Costs [Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 [c.] Net ownership/lease expense for Vehicle 2 [Subtract Line b from Line a.] Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incurstate, and local taxes, other than real estate and sales taxes, such as income taxes, self employment security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average medicular deductions that are required for your employment, such as mandatory retirement contributions, uniquiform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actual life insurance for yourself. Do not include premiums for insurance on your dependents, for when the result in Line 47; subtract Line b from Line 47; subtract Lin | onthly on dues, and lly pay for term nole life or for | \$ | 1,142.57 0.00 | | |
| Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incurstate, and local taxes, other than real estate and sales taxes, such as income taxes, self employment security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average medicular deductions that are required for your employment, such as mandatory retirement contributions, uniquiform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actual life insurance for yourself. Do not include premiums for insurance on your dependents, for what any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you a pay pursuant to the order of a court or administrative agency, such as spousal or child support payn | onthly on dues, and lly pay for term nole life or for are required to ments. Do not ged child. of employment | \$ | 1,142.57 0.00 0.00 | | |

| 36 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. | \$ 0.00 |
|----|--|----------------|
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | \$ 45.00 |
| 38 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. | \$ 5,073.07 |
| | Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37 | |
| | Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. | |
| 39 | a. Health Insurance \$ 419.29 | |
| | b. Disability Insurance \$ 0.00 | |
| | c. Health Savings Account \$ 0.00 | 440.00 |
| | Total and enter on Line 39 | \$ 419.29 |
| | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ | |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. | \$ 0.00 |
| 41 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | \$ 0.00 |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | \$ 0.00 |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | \$ 0.00 |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | \$ 35.00 |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. | \$ 0.00 |
| 46 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45. | \$ 454.29 |

| | | Subpart C: Deductions for D | ebt Pa | yment | | | |
|----------|--|--|---|---|--|----------|----------|
| 47 | own, list the name of creditor, ic check whether the payment incluscheduled as contractually due t | laims. For each of your debts that is secur lentify the property securing the debt, state udes taxes or insurance. The Average Mon o each Secured Creditor in the 60 months by, list additional entries on a separate page | the Ave thly Pay following | rage Monthly ment is the to g the filing of | y Payment, and otal of all amounts the bankruptcy | | |
| | Name of Creditor | Property Securing the Debt | M | verage Ionthly ayment | Does payment include taxes or insurance | | |
| | a. Ally Financial | 2007 Chevrolet Impala with 106,000 miles | \$ | 159.50 | □yes ■no | | |
| | Internal Revenue b. Service | 1988 Chevrolet Suburban with 160,000 miles (value \$500) & 2003 Harley Davidson with 7,800 miles (value \$1200) | \$ | 31.50 | □yes ■no | | |
| | | | Tota | l: Add Lines | | \$ | 191.00 |
| 48 | motor vehicle, or other property your deduction 1/60th of any an payments listed in Line 47, in or sums in default that must be paid the following chart. If necessary Name of Creditor | aims. If any of debts listed in Line 47 are necessary for your support or the support nount (the "cure amount") that you must parder to maintain possession of the property d in order to avoid repossession or foreclose, list additional entries on a separate page. Property Securing the Debt | of your can the creation of your can the cure. List | dependents, yeditor in additor in additor amount wo | ou may include in tion to the ould include any | | |
| | aNONE- | | \$ | | Total: Add Lines | ¢ | 0.00 |
| 49 | priority tax, child support and al | ity claims. Enter the total amount, divided imony claims, for which you were liable as, such as those set out in Line 33. | | of all priority | claims, such as | | |
| | _ | penses. Multiply the amount in Line a by the | ne amour | nt in Line b, a | and enter the | \$ | 76.29 |
| 50 | b. Current multiplier for your issued by the Executive information is available the bankruptcy court.) | hly Chapter 13 plan payment. our district as determined under schedules Office for United States Trustees. (This at www.usdoj.gov/ust/ or from the clerk o | X | Maria | 9.50 | . | |
| | | nistrative expense of chapter 13 case | | : Multiply Li | nes a and b | \$ | 38.00 |
| 51 | Total Deductions for Debt Pay | Subpart D: Total Deductions | | ncome | | \$ | 305.29 |
| 52 | Total of all deductions from in | ncome. Enter the total of Lines 38, 46, and | | | | \$ | 5,832.65 |
| | Part V. DETER | RMINATION OF DISPOSABLE | INCO | ME UNDI | ER § 1325(b)(2 |) | |
| 53 | | Enter the amount from Line 20. | | | | \$ | 5,896.29 |
| 54 | Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child. | | | | | \$ | 0.00 |
| 55 | | ns. Enter the monthly total of (a) all amou fied retirement plans, as specified in § 541 specified in § 362(b)(19). | | | | \$ | 173.00 |
| I | Tradal affall da de de marallana | l under § 707(b)(2). Enter the amount fro | m Lina 5 | 32 | | \$ | 5,832.65 |

| 57 | Deduction for special circumstances. If there are s which there is no reasonable alternative, describe the below. If necessary, list additional entries on a separa You must provide your case trustee with documer explanation of the special circumstances that mak | | |
|----|---|---|----------|
| | Nature of special circumstances a. | Amount of Expense | |
| | b. | \$ | |
| | c. | \$ Total: Add Lines \$ | 0.00 |
| 58 | Total adjustments to determine disposable income result. | Add the amounts on Lines 54, 55, 56, and 57 and enter the | 6,005.65 |
| 59 | Monthly Disposable Income Under § 1325(b)(2). | Subtract Line 58 from Line 53 and enter the result. \$ | -109.36 |
| | D (III ADD) | WILDING CLAIM | |
| | Part VI. ADD | ITIONAL EXPENSE CLAIMS | |
| | Other Expenses. List and describe any monthly experience of you and your family and that you contend should | enses, not otherwise stated in this form, that are required for the heape an additional deduction from your current monthly income underess on a separate page. All figures should reflect your average more | er § |
| 60 | Other Expenses. List and describe any monthly experience of you and your family and that you contend should by 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description | enses, not otherwise stated in this form, that are required for the heape an additional deduction from your current monthly income underes on a separate page. All figures should reflect your average mor | er § |
| 60 | Other Expenses. List and describe any monthly experience of you and your family and that you contend should by 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description | enses, not otherwise stated in this form, that are required for the here an additional deduction from your current monthly income underes on a separate page. All figures should reflect your average more Monthly Amount \$ \text{Monthly Amount}\$ | er § |
| 60 | Other Expenses. List and describe any monthly experience of you and your family and that you contend should by 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description | enses, not otherwise stated in this form, that are required for the heape an additional deduction from your current monthly income underes on a separate page. All figures should reflect your average mor | er § |
| 60 | Other Expenses. List and describe any monthly export you and your family and that you contend should 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. | enses, not otherwise stated in this form, that are required for the here an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average more a Monthly Amount S S S S S S S S S S S S S S S S S S | er § |
| 60 | Other Expenses. List and describe any monthly export you and your family and that you contend should 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. | enses, not otherwise stated in this form, that are required for the here an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average more | er § |
| 60 | Other Expenses. List and describe any monthly experience of you and your family and that you contend should by 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. Total: | enses, not otherwise stated in this form, that are required for the here an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average more a Monthly Amount S S S S S S S S S S S S S S S S S S | er § |

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **08/01/2010** to **01/31/2011**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Food Lion

Income by Month:

| 6 Months Ago: | 08/2010 | \$4,896.31 |
|---------------|-------------|------------|
| 5 Months Ago: | 09/2010 | \$4,896.31 |
| 4 Months Ago: | 10/2010 | \$7,344.48 |
| 3 Months Ago: | 11/2010 | \$4,896.31 |
| 2 Months Ago: | 12/2010 | \$4,896.32 |
| Last Month: | 01/2011 | \$4,896.00 |
| _ | Average per | \$5,304.29 |
| | month: | |

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Quarterly Bonus - amortized

Constant income of \$592.00 per month.